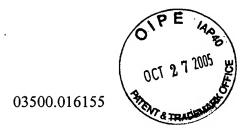
PTO/SB/17 (12-04)

PTO/SB/17 (12-04)
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Office in the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

					0 11 1616			
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818)			Complete if Known Application Number 10/061,155					
FEE TRANSMITTAL			Filing Date		February 4, 2002			
				First Named Inventor YOSHINOBUS				
For FY 2005					Peter K. Huntsin			
Applicant claims small entity status. See 37 C.F.R. 1.27			Art Unit 2624					
TOTAL AMOUNT OF	Attorney Docket No. 03500.016155							
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 06-1205 Deposit Account Name: Fitzpatrick, Cella, Harper & Scinto For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) under 37 C.F.R. 1.16 and 1.17 Check Credit Card Money Order None Other (please identify): Deposit Account Name: Fitzpatrick, Cella, Harper & Scinto Check all that apply) Charge fee(s) indicated below, except for the filing fee								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION								
Application Type Utility Design Plant Reissue	FILING FEI Sma Fee (\$) Fe 300 200 200		00 250 00 50 00 150	<u>Fee</u> 20 13	00 100 80 65 60 80	Fees Paid (\$)		
2. EXCESS CLAIM FEES Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple dependent claims Small Entity Fee(\$) 50 25 100 100 360 180								
Total Claims	otal Claims							
9 - 20 or HP = 0 x 0 = 0 Fee(\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20 0 0								
Indep. Claims	Extra Cla	ims Fee(\$)	Fee Paid (\$)					
3 - 3 or HP = 0 x 0 = 0 HP = highest number of independent claims paid for, if greater than 3								
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets	Extra Sheets		additional 50 or f			Fee Paid (\$)		
- 100 =		/ 50 =	(round up	to a whole r	number) x	=		
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount) Other:								
SUBMITTED BY								
Signature	Mai	hansi-		tration No. ney/Agent)		Telephone 202-530-1010		
Name (Print/Type)	Mark A. Williamson					Date: October 27, 2005		



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

n re Application of:)	
	:	Examiner: Peter K. Huntsinger
YOSHINOBU SHIRAIWA)	
	:	Group Art Unit: 2624
Application No.: 10/061,155)	
	:	Confirmation No.: 9159
Filed: February 4, 2002)	
• •	:	
For: CAMERA, PRINTER, PRINT SYSTEM,)	October 27, 2005
CONTROL METHOD, MEMORY MEDIUM,	:	·
AND PROGRAM THEREFOR)	
· 	,	

Mail Stop Amendment COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450

AMENDMENT

Sir:

Introductory Comments

In response to the Official Action mailed July 27, 2005, the Examiner is requested to amend the above-identified application as follows.